

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <b>1-26-15</b>		2.a. NAME OF CANDIDATE OR COMMITTEE <b>Patricia Fountain</b>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <b>Patricia Fountain</b>		3. ELECTION DATE	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route      City      State      Zip Code      Phone <b>9525 Rookwood Cir. Doltewah TN 37363 423 902 0739</b>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route      City      State      Zip Code      Phone			
5. OFFICE SOUGHT (include district number, if applicable) <b>Collegedale Commission</b>		6. NAME OF POLITICAL TREASURER (may be candidate) <b>Self</b>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input checked="" type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <b>October 1, 2014</b>		8.b. ENDING DATE OF REPORTING PERIOD <b>Jan. 15, 2015</b>	
9. (Check one)			
a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.			
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.			
<b>Patricia Fountain</b> signature of candidate		<b>Patricia Fountain</b> signature of political treasurer	
<b>1/26/15</b> date		<b>1/26/15</b> date	
11. WITNESS SIGNATURE			
<b>Gannen J. Tolbert</b> signature of witness		signature of witness	
<b>1/26/15</b> date		date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT .....		\$ <b>400.00</b>	
b. TOTAL RECEIPTS THIS PERIOD .....		\$ <b>2,220.93</b>	
c. TOTAL DISBURSEMENTS THIS PERIOD .....		\$ <b>2,620.93</b>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....		\$ <b>0</b>	
e. TOTAL LOANS OUTSTANDING .....		\$ <b>0</b>	
f. TOTAL OBLIGATIONS OUTSTANDING .....		\$ <b>0</b>	



2015 JAN 26 PM 3:16  
 ELECTION COMMISSION  
 HAMILTON COUNTY

## SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) _____	14. REPORT COVERING THE PERIOD FROM: <u>10/1/14</u> TO: <u>11/15/15</u>	
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### RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 350.00

b. Itemized Contributions (over \$100 from each source this period) ..... \$ 1,870.93

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$ 2220.93

16. LOANS RECEIVED THIS REPORTING PERIOD ..... \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD ..... \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) ..... \$ 2,220.93

  

### DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

<u>loan payment</u>	\$	<u>2420.93</u>
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____

Total of Expenditures (\$100 or less each payee) ..... \$ \_\_\_\_\_

b. Itemized Expenditures (Over \$100 each payee this period) ..... \$ \_\_\_\_\_

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$ 0

20. LOAN REPAYMENTS MADE THIS PERIOD ..... \$ 2420.93

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) ..... \$ \_\_\_\_\_

  

### 22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) ..... \$ 0

b. Itemized in-kind contributions (over \$100 from each source this period) ..... \$ 0

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) ..... \$ 0

  

### 23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) ..... \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) ..... \$ \_\_\_\_\_

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) ..... \$ 0



## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Patricia</i>		Middle Name <i>Marion</i>		Contribution Received For:	
Last Name/Organization Name <i>Fountain</i>				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <i>9525 Rockwood Cir.</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Doit.</i>	State <i>TN</i>	Zip Code <i>37363</i>	Date of Contribution		Amount of Contribution  <i>1870.93</i>
Occupation <i>Retired Teacher / Curriculum Sp.</i>			Aggregate This Election		
Employer <i>former HCDE, Henry County, GA</i>					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation			Aggregate This Election		
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation			Aggregate This Election		
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation			Aggregate This Election		
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS					
<small>(Carry forward to item 3. of next page if additional pages of this form are used.)          (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)</small>					





# ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD		
<i>Patricia Fountain</i>					FROM:	TO:	
					<i>10/1/14</i>	<i>1/15/15</i>	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	
Last Name/Organization Name						Loan Payments	
Address				Loan Received For:		Date of Loan	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
City		State		Zip Code			
				<input type="checkbox"/> Runoff (Local Elections Only)			
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)							
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
<b>4. Totals for all Loans (complete on last page of itemized loans)</b> (Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)				Outstanding Loan Balance (Beginning of Period)		Loans Received	
						Loan Payments	
				<i>2,620.93</i>		<i>2620.93</i>	
						<i>0</i>	

